

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 215
Registered No. 84

1. PLACE OF BIRTH

County Casa State Arizona
District or Township Miami or Village Lower Miami
City Lower Miami No. Lower Miami St. Lower Miami Ward Lower Miami

2. Full name of child Josephine Sawara

3. Sex of Child Female To be answered ONLY in event of plural births. 4. Twin, triplet or other. Yes 5. No., in order of birth 1st 6. Legitimate? Yes 7. Date of birth May 20 - 1925 Month May Day 20 Year 1925

8. FATHER Full name Sam Sawara 14. MOTHER Full maiden name Esmeralda Saab

9. Residence (Usual place of abode) Lower Miami 15. Residence (Usual place of abode) Lower Miami
If non-resident, give place and state. If non-resident, give place and state.

10. Color or race White 11. Age at last birthday 46 (Years) 16. Color or race White 17. Age at last birthday 27 (Years)

12. Birthplace (city or place) Syria 18. Birthplace (city or place) Syria
(State or country) (State or country)

13. Occupation Merchant 19. Occupation House wife
Nature of Industry Nature of Industry

20. Number of children of this mother 5 (a) Born alive and now living 5
(Taken as of time of birth of child herein certified and including this child.) (b) Born alive but now dead None
(c) Stillborn None 21. Were precautions taken against ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was born alive or stillborn at 10:30 p. m. on the date above stated

* When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.
Signature R. J. Sotolongo
Miriam Ariz
(Physician or midwife)

Given name added from a supplemental report May 27, 25 Address C. E. Iron
Month, day, year Registrar May 27, 25 Registrar

131-580-732